BEST AVAILABLE COPY

| PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004 | | | | | | | | | Application or Docket Number | | | |
|---|--|---|--|-----------------------------------|------------|----------------------------------|---|---------------------|------------------------------|----|-------------------------------|------------------------|
| | | CLAIMS | AS FILED - | | (Column 2) | | | SMALL ENT | TITY | OR | OTHER THAN OR SMALL ENTITY | |
| U.S. NATIONAL STAGE FEES | | | | | | | | RATE | FEE | 7 | RATE | FEE |
| BASIC FEE | | | SMALL ENT. = \$ 150 | | LÄR | GE ENT. = \$ 300 | | BASIC FEE | | OR | BASIC FEE | 300 |
| EXAMINATION FEE | | | Satisfies PCT Article 33(1)- (4) = \$50 / \$ 100 | | | ther situations = 5 100 / \$ 200 | | EXAM. FEE | | 1 | EXAM. FEE | 200 |
| SEARCH FEE | | | U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400 | | All ot | ther situations = 5 250 / \$ 500 | | SEARCH FEE | | | SEARCH FEE | 400 |
| FEE FOR EXTRA SPEC. PGS. | | | 2/ min | us 100 = | | / 50 ≐ | | X \$ 125 = | | | X \$ 250 = | 1.00 |
| TOTAL CHARGEABLE CLAIMS | | | ý minus 20 = | | * – | | | X \$ 25 = | | OR | X \$ 50 = | |
| INDEPENDENT CLAIMS | | |) minus 3 = , | | * | | | X \$ 100 = | | OR | X \$ 200 = | |
| MUL | TIPLE DEPEN | DENT CLAIM PRI | ESENT | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | olumn 2 | | TOTAL | | OR | TOTAL | 901) |
| | | CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3 CLAIMS HIGHEST NUMBER PRESENT | | | | | | SMALL E | ADDI- | OR | OTHER SMALL E | |
| AMENDMENT A | | AFTER AMENDMENT | | PREVIO PAID I | | EXTRA | | RATE | TIONAL FEE | | RATE | TIONAL FEE |
| | Total | * | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | = | l | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | | OR | + \$ 360 = | - |
| - | | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| | • | (Column 1) | | (Colum | ın 2) | (Column 3) | | | | | | |
| AMENDMENT B | | CLAIMS REMAINING · AFTER AMENDMENT | | HIGHE NUMB PREVIO PAID F | ER USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | ſ | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | = | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | | | | ٦ | FEE | | OR | TOTAL ADDIT. FEE | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |

FORM PTO-875 (Rev. 02/2005)